

Review of compliance

<p>Hereson House Limited One Step South Domiciliary Care Agency</p>	
<p>Region:</p>	<p>South East</p>
<p>Location address:</p>	<p>Suite 6, Kent House Romney Place Maidstone Kent ME15 6LH</p>
<p>Type of service:</p>	<p>Domiciliary care service Supported living service</p>
<p>Date of Publication:</p>	<p>May 2012</p>
<p>Overview of the service:</p>	<p>This domiciliary care agency provides support to people with learning disabilities, challenging behaviour, mental health needs and a range of other disabilities and health concerns. They provide this care across Essex, Southeast London, Surrey and Kent and are based in an office in the centre of Maidstone, Kent.</p>

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

One Step South Domiciliary Care Agency was meeting all the essential standards of quality and safety inspected.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We spoke to people using the service over the telephone.

People were happy with the service they received and felt able to be involved in decisions that were important to them.

People felt that staff supported them to be independent and that there were opportunities for them to be involved in their daily activities.

People had a good understanding of how to report any concerns they might have regarding their care. They were given information to help them communicate any issues to the relevant people and they told us that they were confident to do so if necessary.

What we found about the standards we reviewed and how well One Step South Domiciliary Care Agency was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this standard.

Outcome 04: People should get safe and appropriate care that meets their needs

and supports their rights

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard.

Outcome 07: People should be protected from abuse and staff should respect their human rights

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

The provider was meeting this standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The provider had an effective system to regularly assess and monitor the quality of service that people received. The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

The provider was meeting this standard.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People told us that they felt involved in their care and were given enough information to make their own choices.

One person told us, 'I was given a lot of information from the service regarding care aims when I first came. I know most of the staff and what they'll help me with and not help with, they give choice of what tasks I can do.'

Another person told us, 'I am given enough information to make decisions and people talk to me in a way I can understand. They speak to me clearly and in a good manner.'

Other evidence

People were supported in promoting their independence and community involvement. We saw care plans that were person centred and included pictures and symbols to aid understanding. There was evidence that these were being signed by service users after reviews of their care had taken place.

We saw that people were being given choice in the service they used to support them. Agreements we saw had been signed recently to remind people of their right to change service provider.

We saw service user guides that were given to people when they join the service. These were written in an 'easyread' format for those who required this. The guides included information on localities where people would be living, the responsibilities of the people using the service and the areas in which staff could support people if necessary. They also provided information on the types of training staff supporting them would have received and the aims of the service. There was a comprehensive section on equality and diversity. The guides also included support to organise reviews with people using the service every twelve months to discuss hopes, goals, choices and progress.

Staff we spoke with had a good understanding of how to respect the privacy and dignity of those they support.

One member of staff told us, 'People expect a time and to know who is coming. When we arrive we discuss the support plan of the day. We always ensure privacy and make sure doors and curtains are closed if necessary. I speak politely to people as I find that I get back what I put in.' Some people we spoke with told us that they did not always know who would be supporting them and that they would like to be made aware of this in advance.

The staff we spoke with were also aware of the importance of promoting independence and encouraging involvement in the community. One staff member said, 'We try and promote involvement in the community and we do quite a lot of prompting. We try and make things exciting and involve family members. We ask once a month for all service users to get together for an activity. Also, the local authority run activities that people can attend.'

The people we spoke with who use the service told us that they felt able to take part in decisions relating to their care and that these decisions were respected. They told us that they were given relevant information to make decisions and were encouraged to be as independent as possible. One person said, 'I feel able to take part in my care and I can look at my care plan if I want to; there's one in my home.'

Our judgement

People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this standard.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

People using the service generally felt content with the care they received. One person told us that, 'The people at the service are understanding when I speak to them about my care and things get sorted out if I am concerned about anything.'

Other evidence

Peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We assessed care plans and found that they were informative and personalised. They were easy to use and were available in an 'easyread' format so that people who use the service could refer to them when they wished.

We saw that the service was responding to people's changing needs by reviewing and updating care plans regularly. There was evidence of both scheduled and reactive reviewing in the plans.

Each person being cared for had a variety of risk assessments attached to their care plan which were individualised depending on their specific needs. These included risk management guidance for staff and people who use the service in formats appropriate to the reader concerned.

We also saw evidence of incident forms being used properly and appropriate action being taken by the service.

Staff told us that there were procedures in place to handover care to others to ensure the continuing safety of those using the service. This was sometimes hampered by the use of temporary staff but the service tried to ensure that the same temporary staff were used each time to avoid disruption and minimise risk.

We saw evidence of people being advised in advance of the staff who were scheduled to support on each day. The provider might find it useful to note that not all of the people who used the service that we spoke to had copies of these timetables every month as planned.

There was a procedure in place to deal with emergencies and changes in staffing levels. One staff member told us, 'I have a good team. There is continuity of care even if people are sick or on holiday.'

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People we spoke to who use the service told us that they would know who to contact if they were concerned about any aspect of their care and that they felt confident that appropriate action would be taken as a result to ensure their safety.

Other evidence

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

We saw a safeguarding folder which contained a policy unique to the service, the Kent County Council (KCC) Safeguarding Vulnerable Adults policy and other documentation which showed an understanding of current best practice. There were also examples of easyread 'What Happened?' forms which we were told were distributed to people who used the service when incidents occur.

We saw that the safeguarding policy was repeated in staff handbooks provided at the commencement of employment. Staff we spoke with told us that this was one of the places they could access safeguarding information. One staff member told us that all staff sign the safeguarding policy when they start working for the service to show that they have understood its contents.

All of the staff we spoke to had received restraint training whether that was as part of their induction or as a specific course. Staff we spoke to showed a good understanding

of the various types of abuse and signs and behaviours they should be aware of when caring for vulnerable adults. They were also confident in who they should report concerns to and how such information should be passed on to other bodies.

We saw evidence that the agency responded appropriately to any potential safeguarding incidents, these were documented and records kept of any action that was taken. We spoke with people who used the service and they were able to demonstrate an understanding of different types of abuse and how they would report it. One person was able to explain how the service had helped them to feel supported after an incident involving another person who lived in the same house.

Our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

The provider was meeting this standard.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

One staff member said ' I feel well supported with my training. I can address my learning and development through supervisions every month and appraisals.'

Another staff member said 'We do a lot of training but there is a lot of e-learning. It would be better to have more one to one support.'

Other evidence

Staff received appropriate professional development.

We saw evidence that new staff were given a 4 day induction at the National Centre for Learning and Development (NCLD). They were then placed into their services and given a further in-house induction. Newer staff confirmed that this was the type of induction that they received.

We saw certificates to show that staff were given basic training in areas including health and safety, first aid, fire safety and manual handling. There were also staff members who had completed more specific training in areas including epilepsy and infection control. We were told by the manager that the service provided rapid response training when required. The provider may find it useful to note that staff informed us that this method of training was not being provided.

We saw evidence that ongoing training took place using a number of formats including e-learning, distance learning and direct teaching. However, staff told us that they would prefer to have more of the direct learning and less of the e-learning.

We were told that the aim of the organisation was to provide monthly supervisions for staff and regular appraisals. Staff told us that they were receiving monthly supervisions and appraisals and this was a forum in which they could discuss their learning and development needs.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this standard.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

People who use the service were asked their views about their care and treatment and they were acted upon. One person told us, 'My keyworkers ask me if there are any problems with the service and I get to say if there are any issues.'

Other evidence

The provider took account of complaints and comments to improve the service. We saw annual surveys that were due to be sent to professionals and to family members. The surveys we saw for people who used the service consisted of six relevant questions and these were carried out monthly. The answers to these questions were being audited and analysed and actions were being developed to improve the service as a result.

We saw evidence of a complaints policy which was also available in an 'easyread' format. We saw records that showed complaints were being logged and acted upon appropriately.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of service that people received. The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

The provider was meeting this standard.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. We ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
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